

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyis	st(s)E	d Leahy					
II. Name of lobbyis	st's partnersh	ip, firm or corp	oration, if any	:		•	
	Adapt	Pharma, Inc.					
(N		hip, firm or corpor	ration)				
c/o F	Politicom Lav	w LLP, 28 Libe	rty Ship Way	, Suite 2815,	Sausalito, C	A 94965	•
	(Street)		Town/City)		(State)		Code)
(415)903-2	2800)	(415)	610-7604 (Fax)	e-ma	il <u>reporting@</u>	politicomla	<u>iw.co</u> m
III. This statement reportable expense						y file a separ	rate report for
All reportable tr	ansactions occ	curring in the mo	nths prior to th	e reporting date	e relative to the	e following cl	lient:
	Adapt Pha	ırma, Inc					
ΔD.	(Full Name	of Client as it app	bears on the Lobb	yist Registration	Form)		
OR All reportable tra		he lobbyist (incl	uding the lobby	vist's family), c	or the lobbying	firm listed b	elow which are
IV. Date of Report	April 25,	2018 🗌		July 25.	2018 🗆		•
•		ty from date of registration to 3/31/18		activity from 4/1/18 to 6/30/18			
		31, 2018 🔀 17/1/18 to 9/30/18		-	30, 2019 🛮 0/1/18 to 12/31/	18	
V. There have be If this box is checke Concord, NH 0330	d, complete ju						
VI. Check if additi	ional renorts :	are attached:					
If you have recommended in the second sec	•		s, you must file	Addendum A	- Fees and Ex	openses	
· · ·	d an honorariu	m or reimbursed				-	ariums or
☐ If you, your firm	m, or your fam	ily has made po	litical contribut	ions, you must	file Addendu	m C— Politica	al Contributions
Sworn Statement/A I have read RSA 15 and complete to the (Signature of lobby	RSA 15-B, F best of my kn	RSA 14-C and RS owledge and bel	SA 664 and her lief.		ffirm that the form $\frac{1}{2} \left(\frac{3}{2} \right) \left(\frac{3}{2} \right)$?	ormation is true
	Leahy		<u> </u>				
(Print Name of lob	DYIST)						

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Ed Leahy		
II. Name of lobbyist's partnership, firm or corporation, if any:		
(Name of partnership, firm or corporation)	<u> </u>	
III. Name of Client Adapt Pharma, Inc.	Date	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, o	or public relations service
a) Total of all fees received in this reporting period	a) \$	1846.08 V
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ear)	2,922.96 🗸
c) Total of all fees received to date (Add lines a and b)	c) \$	4,769.04 🗸
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if may be filed aggregate expenses; (b) de: meals pu ss than \$10 and with a va orting period ue of greate er than \$25, expense re	expenditures are made be d for the lobbyist(s)/firm total of all expenses pain the aggregate total of a prehased during a business that is given to the perso lue of \$25.00 or less); an of greater than \$25.00 for than \$25, purchase of but not greater than \$50 combursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	0.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI	2 (2	0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	0.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	0.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying	fees during this reporting
Paid to:	Amou	nt:
N/A	\$	0.00
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that th	ne foregoing information
(Signature of Johnwigt)	,	10/9//P (Date)
(Signature of lobbyist)		(Date)
Ed Leahy		
(Print Name of lobbyist)		

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